

City of Rochester Building Safety Department 2122 Campus Dr SE, Suite 300

Rochester MN 55904-4744 Phone: (507) 328-2600 Fax: (507) 328-2601 www.rochestermn.gov

SIGN Permit Application

	Office Use Only	(3/05)			
App. No.					

Date	Tenant/E	Building Name							
Site Address	lumber		Street					Suit	e/Unit No.
		n and/or Addition		Block		Lot	Plat		Parcel
Applicant is: • Owr	ner • Con	tractor/Installer • 0	Other (describe)			II.			
Owner	Name Address	Last	First		MI	Phone ()		
	City			State		Zip Code			
Contractor	Company					Phone ()		
	Name	Last	First	ı	MI	Roch. Contr. No.			
	Address	Last	FIISI			Sign Lic.	No.		
	City			State		Zip Code			
Engineer/ Designer	Company					Phone ()		
	Name Address	Last	First		MI	Registrat (State of MI			
	City			State		Zip Code			
Sign Type (check one)	 Advertising Sign: A sign that directs attention to a business, service, event or location <u>not</u> related to or on the premises where the sign is located. Business Sign: A sign that directs attention to a business, service, event, or commodity sold or conducted on the premises where the sign is located. 								
Valuation	Total valu	ation of work \$					(r	materia	ls and labor)
	 All professional sign installers must be licensed by the City of Rochester Applications for sign permits must be accompanied by the following information: An accurately dimensioned site plan showing the proposed location of the sign on the property and/or wall elevation sketch (for wall sign only). An accurately dimensioned drawing of the sign indicating the following: support system sign material, dimensions and height size of the lettering content of the message on the sign A statement as to the type of lighting which will be used to illuminate the sign. (If illuminated, must be approved by a nationally recognized testing lab.) 								

	DESCRIPT	ION OF WORK	(Please complete	e appropriate section)		
Advertising Sign (R502)	Width Height Sign Credit Number or Fee in Lieu of Credit	x Length	Date P	= Total Square Fe	et	
Business Sign (R501)	Sign Type (check one) Freestanding Projecting Wall Graphics Portable (Beginni Novelty (Beginni) Width Height Lighting (check one) Yes If so, No	• Chu • Mard ning Date) ng Date) x Length	elopment rch quee	Sun Canopy Service Canopy Roof Unknown (Ending Date) (Ending Date) = Total Square Feet		
	List All Existing Sign	s on Premises:	(Add Additional	Pages if Necessary)		
	Туре	Size X X X	= = = =	Sq. Feet	Location Type	;
conformance with a and Use Tax Ordina start without a perm case of work which	sign permit, and I certify pplicable laws of the Stance 129.25. I understant. I certify that the work requires a review and a I am properly licensed a	ate of Minnesota and this is not a p will be in accord pproval of plans	and ordinanc ermit but only dance with all	es of the City of Ro an application for permit conditions	ochester, including C a permit and work is	City Sales s not to
	Applicant's Si	nnature			Date	
		WRITE BELOW	THIS LINE -	Office Use Only	Date	(3/05)
ZONING REVIEW (• Site Plan • Surveyor's Cert Comments: Sign Permit No.	Zoning Dis	rict	I	Flood Protection R Flood Protection E Review Required		
Zoning Approved by	/:		D	ate:		
Comments:						
Permit Approved by	<i>;</i> •		ח	ate [.]		